PART B - FEE(S) TRANSMITTAL

OIPE		PARTE	5 - FEE(S) T	TRANSMITTAL			
Complete and send the	plete and send this form, together with applicable fee(s), to: Mail				Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450		
OCT 2 0 2005 8	OCT 9. 0 2005 (**)				Alexandria, Virginia 22313-1450 (571) 273-2885		
INSTRUCTIONS This for	m should be used for trans	smitting the ISSI			ired) Blocks I through 5	should be completed where	
INSTRUCTIONS: This for appropriate AD urther consultable and provided the maintenance fee notification	respondence including the I below or directed otherwise s.	Patent, advance or in Block I, by (a	ders and notific specifying a n	ration of maintenance fees view correspondence address	will be mailed to the curren; and/or (b) indicating a sep	t correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENC	E ADDRESS (Note: Use Block 1 for	any change of address)		Note: A certificate of	mailing can only be used	for domestic mailings of the	
75	90 08/08/2005			papers. Each addition	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
John L. Schmitt				Ce	rtificate of Mailing or Tran	smission	
P.O. Box 656 Geneva, IL 60134-0656				States Postal Service	I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
				transmitted to the USF	transmitted to the USPTO (571) 273-2885, on the date indicated below.		
0/21/2005 DEMMANU2 00000	024 10774133			John		(Depositor's name)	
FC:2501 700.00 OP				(Signature)			
2 FC:8001	C:8001 30.00 OP				ber 18, 2005	(Date)	
APPLICATION NO.	FILING DATE FIRST NAMED INV		NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
10/774,133	02/06/2004 Pavid J			Craus	•	8390	
TITLE OF INVENTION: FI	SH JAW GRIPPER TO FAC	CILITATE HOOK	REMOVAL				
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$700		\$0	\$700	11/08/2005	
EXAM	EXAMINER		тт Т	CLASS-SUBCLASS]		
ROWAN, KURT C		3643		043-004000	•		
1. Change of correspondence	address or indication of "Fe	e Address" (37	2. For printin	ig on the patent front page, li	st · Toba	0-5	
CFR 1.363).	ence address (or Change of (orrespondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,				
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2				
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND						· · · · · · · · · · · · · · · · · · ·	
PLEASE NOTE: Unless recordation as set forth in	an assignee is identified be 37 CFR 3.11. Completion of	low, no assignee of this form is NO	data will appear I a substitute for	on the patent. If an assign filing an assignment.	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNE				(CITY and STATE OR CO			
·		·	•		,		
Please check the appropriate		ies (will not be pr	inted on the pate	ent): 🗖 Individual 🗖 C	orporation or other private gr	roup entity Government	
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s): A check in the amount of the fee(s) is enclosed.							
A check in the amount of the fee(s) is enclosed. Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached.							
Advance Order - # of Copies _ 1 0			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to				
			Deposit Accour	nt Number	(enclose an extra	copy of this form).	
	AALL ENTITY status. See 3	7 CFR 1.27.	☐ b. Applicant	t is no longer claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO i NOTE: The Issue Fee and Pu interest as shown by the reco	s requested to apply the Issu blication Fee (if required) w rds of the United States Pate	e Fee and Publicat ill not be accepted nt and Trademark	tion Fee (if any) I from anyone ot Office.	or to re-apply any previousl ther than the applicant; a reg	y paid issue fee to the applic istered attorney or agent; or t	ation identified above. the assignee or other party in	
Authorized Signature & & &					tober 18, 20		
Typed or printed name		Registration	No. 28,111				
This collection of information an application. Confidentialit submitting the completed appeth this form and/or suggestions Box 1450, Alexandria, Virgin Alexandria, Virginia 22313-1 Under the Paperwork Reduction.	450.		Own Beile i	CIGNO TO THIS ADDRESS	3. BEIND TO, Commissioner	lor Falents, F.O. Box 1430,	
					r-you varid Olvid Collab	i manifoci.	

PTOL-85 (Rev. 07/05) Approved for use through 04/30/2007.